

Why the silence on Indigenous health?

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In the 51 years of the *Australian Journal of Physiotherapy* there have been only two brief references to Australian Indigenous people. In 1970, the 'primitive and spiritual beliefs' of Aboriginal people were discussed together with those of Egyptian, Indian, and Chinese people in a paper on early understandings of respiration (Gandevia 1970). In 1999, a study identified that the opportunity to work with Aboriginal people was a valued part of remote area practice (Bent 1999).

In comparison, although the *Medical Journal of Australia* contained few Indigenous health publications in its early years, the subject received much more attention from the 1950s onwards, and a dramatic increase in interest from the 1970s. In the 1990s Indigenous health accounted for over 4% of the pages of the *Medical Journal of Australia* (around 280 publications) (Thomas 2004). There are, of course, differences in the development and histories of the medical and physiotherapy professions and their journals in Australia, but it is still a telling contrast.

The scant attention that Indigenous health has received in the *Australian Journal of Physiotherapy* is not because physiotherapy and the major health problems affecting Indigenous people have little in common. Physiotherapy has an important role in the prevention and management of many of the conditions and illnesses that affect Indigenous Australians disproportionately. For example, in 2001:

- 16% of Indigenous Australians reported some form of long-term arthritis compared to 13% of non-Indigenous Australians
- circulatory system diseases, e.g. stroke, accounted for around one-quarter of all Indigenous deaths
- the prevalence of diabetes in the Indigenous population was 11% compared to 3% in the non-Indigenous population
- the Indigenous death rate from chronic obstructive pulmonary disease was three to four times the total Australian rate
- the rate of injuries requiring hospitalisation was about twice as high for Indigenous Australians as for non-Indigenous Australians (ABS & AIHW 2003).

So, why the silence on Indigenous health?

It is possible that physiotherapists have published on this topic in journals other than the *Australian Journal of Physiotherapy*. Only a few articles are known to us (e.g. Honeyman and Jacobs 1996). There may be other published papers where authors do not identify themselves as physiotherapists or define their research as physiotherapy research.

It is not that issues examined in the *Australian Journal of*

Physiotherapy have been confined to 'clinical practice'. Ethics, psychosocial factors, attitudes, different cultural groups, communication, and health promotion are not new topics for this journal. Does it mean that physiotherapists involved in Indigenous health or other areas of public health do not see the journal as the place for discussion and dissemination of ideas?

Perhaps the lack of publication is due to a lack of awareness of Indigenous health issues. There is currently little Indigenous health content in undergraduate physiotherapy education in Australia. Is Indigenous health perceived as a rural or remote issue of little relevance to the majority of physiotherapists, even though almost one-third of the Indigenous population lives in major cities? (ABS & AIHW 2003).

The absence of research or writing may be because physiotherapists are not seeing Indigenous patients. A 2001 survey of the 1216 discrete Indigenous communities in Australia found that 60% had no access to physiotherapists (ABS & AIHW 2003). Factors such as distance from services, availability of transport, the availability of culturally appropriate services, and private health insurance cover can affect access to and use of services. Access to physiotherapy services is itself an area that needs further research.

Alternatively, physiotherapists may not see the benefit of Indigenous health research if they consider Indigenous health to be an intractable problem. It is true that the provision of high quality health care to Indigenous communities presents formidable challenges. However there are some signs of improvement in health indicators. For example Indigenous mortality rates in the Northern Territory are slowly coming down (Condon et al 2004) and international experience (e.g. New Zealand, Canada, United States) shows that it is possible to improve indigenous health status (Ring and Firman 1998).

Another view is that the underlying causes of poor Indigenous health are outside the domain of physiotherapists. That low employment levels and socioeconomic status, inadequate access to education and health services, and poor living conditions are significant determinants of Indigenous health is not contested. However, these broader social dimensions influence the health of all people; they do not seem to present a barrier to research in other arenas.

It is possible that physiotherapists are wary of the cultural sensitivities associated with Indigenous health research. Indigenous people reasonably demand the right to control their own lives. Does respect for Indigenous self-determination and cultures need to equate to an absence of involvement? One commentator has noted '...in some sectors of health care provision the emphasis on cultural difference has contributed to the inadvertent marginalisation of Indigenous issues from expert input' (Brady 2004, p.10).

Similarly, the tainted past of Indigenous health research associated with histories of colonisation may create understandable hesitations (Humphery 2001). While it is important to be mindful about imposing non-Indigenous solutions and to avoid repeating colonial representations of Indigenous people, the Indigenous intellectual Marcia Langton has criticised non-Indigenous people who dodge their responsibilities by hiding behind the requirement for Aboriginal involvement (Langton 1993, cited in Thomas 2004). The *Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research* (NHMRC 2003) provide a framework for developing culturally sensitive and ethical research approaches.

Despite the complexities, there is room for non-Indigenous physiotherapists, as well as Indigenous physiotherapists, to work with Indigenous communities to build clinical, research, and educative partnerships. Physiotherapists working in Indigenous health need access to an evidence base to inform clinical practice, advocacy, and the delivery of physiotherapy services across the cross-cultural interface with Indigenous clients. Some clear gaps in our understanding include the application of techniques or programs in an Indigenous context, investigation of different models of service delivery, and inequity in access to physiotherapy services.

The number of articles published in the *Australian Journal of Physiotherapy* is not the only indicator of professional interest in a subject, but it does throw some light on our engagement as a profession. The Australian Physiotherapy Association Code of Conduct refers to physiotherapists working towards achieving justice in the provision of health care for all people. We can't talk about the health of *all* Australians and fail to reflect on what we are doing for those Australians who experience the greatest health inequalities.

An ongoing dialogue within the profession about role of physiotherapy in Indigenous health is required. We need to inform this discussion with more than the cursory attention that has been given to Indigenous health to date in the pages of our professional journal.

Even economists lament that a technologically advanced nation such as Australia appears unable to improve the health of its most disadvantaged people, rating Australia as 'capable

but culpable' (Access Economics 2005). Will this also be the epitaph for the physiotherapy contribution to Indigenous health in Australia?

Indigenous health research, service provision, and policy context are all dynamic areas. This is likely to remain the case for the foreseeable future and the challenge for each of us is to attempt to engage with the issues within our own social and work environment.

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